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APPLICANTS

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** CONTINUING DATA *****

none of 10/26/04

** FOREIGN APPLICATIONS *****

none of 10/26/04

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 04/30/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	CA	7	31	3
Examiner's Signature <i>[Signature]</i> Initials <i>10/26/04</i>				

ADDRESS

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TITLE

Cam engaged, lever propelled wheelchair

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees
RECEIVED	No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> 1.16 Fees (Filing)
592	No. _____ for following:	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____